

# COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM ANNUAL REPORT

PROGRAM YEAR 2003  
January 1 - December 31

SUBRECIPIENT:

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_

PHONE #:

\_\_\_\_\_

CONTACT PERSON:

\_\_\_\_\_

PROJECT NAME: \_\_\_\_\_ PROJECT #

\_\_\_\_\_

PROJECT DESCRIPTION:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Project Budget	Amount Expended During Program Year	Amount of Unliquidated Obligation
\$ _____	\$ _____	\$ _____

**PROGRAM INCOME** (if applicable):

Source(s):

\_\_\_\_\_

\_\_\_\_\_

Amount:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Use(s) of Program Income:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Balance of Program Income as of 12/31 \_\_\_\_\_ \$ \_\_\_\_\_

**A. ACTIVITY STATUS - Describe Accomplishments and/or delays during year:**

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**B. BENEFICIARIES - INCOME**

1. Total number of Households (H) or Persons (P) assisted \_\_\_\_\_  
(Specify Household or Person)
2. Total of #1 who **ARE** Low and Moderate Income Persons \_\_\_\_\_
3. Total of #1 who are Low Income Persons \_\_\_\_\_
4. Total of #1 who **ARE NOT** Low and Moderate Income Persons \_\_\_\_\_

**C. BENEFICIARIES – RACE/ETHNICITY**

Of the number of persons served in #1, how many are:	RACE # Total	Ethnicity # Hispanic
White		
Black/African American		
Asian		
American Indian/Alaskan Native		
Native Hawaiian/Other Pacific Islander		
American Indian/Alaskan Native & White		
Asian & White		
Black/African American & White		
Am. Indian/Alaskan Native & Black/African American		
Other Multi-Racial		
Asian/Pacific Islander		
Hispanic		
TOTAL		

- D. Total of #1 who are FEMALE HEADED of HOUSEHOLD \_\_\_\_\_
- E. Total of #1 who are 62 or older \_\_\_\_\_

**F. REPORTS (Attach any other reports due per agreement.)**

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\_\_\_\_\_  
Date

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Signature of Director